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001200 7590 06/18/2004

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HOLLY TUYNMAN	(Depositor's name)
<i>[Signature]</i>	(Signature)
8/27/2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/698,664	10/31/2003	Attilio Tomasi	H053912.0132US0	3777

TITLE OF INVENTION: CRYSTALLINE FORM II OF CABERGOLINE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	09/20/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
AULAKH, CHARANJIT	1625	514-288000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Akin Gump Strauss
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3 _____

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

PHARMACIA ITALIA, S.p.A.

MILAN, ITALY

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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08/27/04

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02 FC:1504	300.00 OP
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